

Jennifer: An Expert System for the Epidemiological Analysis of the Information Generated from a Microbiological Surveillance Network (RVM) in Spain

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Background

The development of a network connection five microbiological laboratories from 5 hospitals in La Comunidad Valenciana gives real-time data from microhiological analyses. This data is extensive and it is very difficult to interpret each result independently due to the number of results received each day and because it has to be compared to data stored previously from the same

Methods

After initialization of the system, the process begins by closing all expired cases. It then scans for existing condition records and identifies new test results queued for processing, as shown in the diagram below.

> In addition to the tables created for the Microbiological Surveillance Network. cavaral new tables were designed to aid in data analysis

· Disease Map: List of diseases associated with a given test result, microorganism and type of specimen · Infection Type: List of potential infection types. Includes columns indicating whether each infection type ie final (does not require further tests to definitively assign case type), the case type associated to each infection type, and the priority assigned to each case type if different types are indicated in a given condition record. . Infection Map: List of infection types associated with a given test result. microorganism, and type of specimen Includes columns indicating whether infection type depends on the combined results from different tests or on an observed increase in a single test result, and in the latter case - the fold-change that is required . Dependences Map: List of infection types dependent on an association

among multiple test results. Includes

columns indicating the types of tests

and specific results required.

3. Check for pre-existing condition record Each time a disease is associated with a test result, the system checks for a pre-existing record of the disease condition that is associated with the result (condition record). Pre-existing condition records must meet the following criteria: Same patient Same disease · The time between the condition record and the test

1 Initializa taet recult data

Patient

Specimen

2 Obtain the disease

Microorganism

obtained for each test result:

Once the process is initiated the following data is

The disease is identified based on the tune of enerimen

type of test, and microorganism for which the test was

performed using the Disease Man table. If the disease is

not found, the result is marked as processed.

result date is not longer than the time of immunity of If a condition record meeting these criteria doesn't exist, a new record is created. If the condition record evicts and is closed, the result is added to the record and marked as processed.

the disease in days

- To create a new condition record, patient, disease and test result data are needed. The new condition record will consist of
- Date Patient identification
- Disease identification Microorganism identification associated with test result
- Infection Type Case Type
- Case confirmation. If the disease needs confirmation this value will be N. If it does not, the value will be S.
- . Case closure. S indicates the case is closed. By default this value is N

5. Obtain the infection type

The infection type is determined using the values for test id mic id ener id res id (test microprospiem specimen and result) listed in the Infection Map table. If an infection type cannot be determined from these data the result is associated with the condition record





Case types are determined that correspond to the infection types associated with each of the test results in the condition record. The case type with the highest priority as lieted in the Infection Tune table is used to define the case

- . Yes, If the current test result allows definitive classification of infection- and case-type, the case is closed and the result marked as processed
- 7 le the case tune final? No. Continue.
- 8. Is this the first test result in this condition record? · Yes, Mark test result as processed.
- No Continue
- 9. Does determination of infection type depend on a relationship to the result from a different test?
- · Yes. Check Dependences Map table to determine the infection type based on results from different types of tests (step 10)
- 10. Determination of infection type based on results from different types of tests For each new result R, scan the condition record for associated test results R0 based on criteria from the
- . The R0 test is the same as test_id_first

Dependences Man table

. The R test is the same as test id second . The Pf value type is the same as yell id first . The R value type is the same as val id second

If a valid infection type is assigned, and corresponds to a case tune that is final close the case and mark the result as processed. If the assigned infection type is not final continue to sten 11





- No Mark the result as processed 12. Determination of infection type based on changes in test results over time

. Yes. Check condition record to determine infection

type based on changes in test results over time (step

- Obtain previous results Bi in the condition record that meet the following parameters with respect to the current value R0:
- Same patient Same micrographism
- Same test
- Same specimen Same laborators . The time elapsed from Ri to R0 is not longer than
- the seroconversion time (5 weeks for default) For each previous result Ri that meets these criteria,

calculate the fold-change between the previous result and the current result (R0/Ri). Assign infection type from the Infection Map table based on the calculated foldchange. If infection type corresponds to a case type that is final close the case and mark the result as processed

13. Finish resul

If at the end of this process, a final infection type cannot be assigned to the result, the test result is added to the condition record and marked as processed

Results

An example of a condition record (Infectious mononucleosis)



For January 2005, 5029 condition records from 4 laboratories were created. Of this, 344 records could be closed and assigned a case type 38 were old cases 320 were new cases, and the rest were cases waiting on a new test result for case and infection type to be resolved. All laboratories had similar proportion number of case type results

Conclusions

The Jennifer system was able to process one month's worth of results from four of our five laboratories. The next step in assessment of the program is to begin parallel testing matching each new case of a notifiable disease sent vi existing notification pathways with the results from the Jennife evetam to datarmina whather it classifies results and cases as effectively as existing means. The list of diseases included in the Jennifer database is broader than the list of notifiable diseases, so the epidemiological information generated is expected to be more extensive. The high number of new cases at the beginning will eventually decrease when time passes and more data is stored